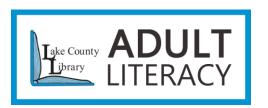


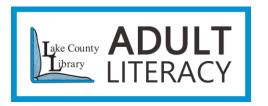
# **Learner Background Sheet**

DATE:			
First Name:	Middle Initial: Last Name:		
Date of Birth:	Native Language: _		
Mailing Address:	City:		ZIP Code:
Street Address:	City:		ZIP Code:
Home Phone:	Cell Phone	·	
Work Phone:	Ok to call?	Yes No	
E Mail Address:			
How did you hear about us?			
	Emergency Conta	ct:	
Emergency Contact Name:			
Phone:	Relationshir	o to vou:	



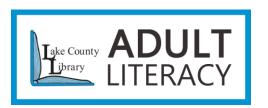
## **Gender Identity:**

What gender do you identify as?				
a man (cis or transgender) a woman (cis or transgender)				
non-binary or genderqueer not sure				
I prefer not to answer this question I prefer the term				
Ethnic Identity and Origin:				
2. Are you of Hispanic, Latinx, or Spanish origin?				
No, not of Hispanic, Latinx, or Spanish origin				
Yes, Mexican, Mexican American, Chicanx				
Yes, Puerto Rican				
Yes, Cuban				
Yes, another Hispanic, Latinx, or Spanish origin				
If you like, you can write your origin here:				
(For example, Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc.)				
Racial Identity and Origin:				
What is your race? Please select as many responses as you like.				
American Indian or Alaska Native				
If you like, you can write your enrolled or principal tribe(s) here:				
(For example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional				
Government Nome Eskimo Community, etc.)				

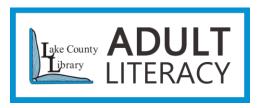


## Racial Identity and Origin Cont'd:

Chinese Vietnamese Filipino Korean	
Asian Indian Japanese Other Asian	
If you like, you can write your origin here:	
(For example, Pakistani, Cambodian, Hmong, etc.)	
Black or African American	
Native Hawaiian Samoan Chamorro	
Other Pacific Islander	
If you like, you can write your origin here:	
(For example, Tongan, Fijian, Marshallese, etc.)	
White	
If you like, you can write your origin here:	
(For example, German, Irish, English, Italian, Lebanese, Egyptian, etc.)	
Other race	
If you like, you can write your race or origin here:	
<u>Let's Get to Know You:</u>	
Highest Level of Education Completed: Country of Completion:	
Current Reading Level (IF KNOWN)	
Employed: YES NO LOOKING DISABLED RETIRED	



Type of current or previous employment:						
Known Employment B	arriers: Cii	cle any that a	pply (does no	t affect services)		
Criminal History	riminal History Cultural Barriers Disable Displaced Homemaker				emaker	
Economic Disadvantag	conomic Disadvantage English Language Learner Exhausting TANF w/i			ANF w/in 2 years		
Foster Care Youth Homeless Long Term Unemployment						
Low Literacy Levels Migrant Farmworker Seasonal Farmworker						
Do you have internet	access?	Compute	r or Smartpho	ne? Do you	use Zoom?	
Have you had any Adu	Have you had any Adult Education?Previous Tutoring?					
Please comment about your school experience:						
Why do you want a tutor now?						
Circle any areas that present a problem: Sight Hearing Medications						
Any known Learning [	Disability: _					
Things that Interest yo	ou:					
Tutor Preference:	Smoker	Nonsmoker	Doesn't ma	atter		
	Male	Female	Other	Doesn't m	atter	



Nearest Libra	ry to you:	Redbud	Redbud Lak		Middle	liddletown		Upper Lake	
Where would	you like to r	meet?							
What days do	you have ti	me for tutoring	<b>;</b> :						
SUN	MON	TUE	WED		THUR		FRI	SAT	
Preferred time	es:			<del></del>			<del> </del>		
Please list any	minor child	lren in the hom	e, or in	your car	e: (include	grando	hildren)		
Name					Gender Identity		Date of E	ate of Birth	
Do you have any questions or concerns?									